State of South Dakota



Candidate's or Committee's Report of Receipts and Expenditures

RECEIVED Candidates and candidate committees: File in the office where you filed your nominating petition, PACs, political party, ballot question and other committees: File with Elections Department, Secretary 2015 S.D. SEC. OF STATE State's Office, 500 E Capitol Ave, Pierre, SD 57501-5070 See "South Dakota Campaign Finance Reporting Guidelines" for specific instructions on completing this report. Name of Candidate or Committee: SD Assn of Healthcare Organizations Political Action Committee Complete Mailing Address: 3708 W Brooks Place; Sioux Falls SD 57106-4211 David R Hewett, Treasurer Name of Person Making Report: **Daytime Phone Number:** 605/361-2281 If you are a candidate, what office are you seeking: N/A If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed. N/A Type of Report: Year-End Report of Receipts & Expenditures For Reporting Period Ending: December 31, 2004 The following verification must be completed before submitting report. VERIFICATION OF PERSON MAKING REPORT (type name), certify that I have examined this report and to the best I, David R. Hewett of my knowledge and belief it is true, correct and complete. Date: Candidate Signature or Signature of Committee Treasurer or Chairperson Revised March 1999 Ver 1.01

Total of Itemized Contributions from Individuals:

SD Assn of Healthcare Organizations Political Action Committee

\$0.00

December 31, 2004

Schedule A - Direct Contributions

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and the same from political parties and enter these sums as unitemized contributions on their respective lines below and on the next page. Any contribution of more than \$100 or aggregate during a calendar year from an individual or political party and all contributions from PAC's must be entered as a separate item (itemized) giving the amount, name, address and place of employment (if applicable) of the contributor. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space, or you may attach additional sheets of paper.

Unitemized Contributions from Individuals:			\$0.00	
Itemized Contributions from In Name	dividuals: Residence Address	Place of Employment (Name of Employer	Amount	
	Residence Address	Place of Employment (Name of Employer)	Alliount	
None				

<u></u>				

\ <u></u>			***************************************	
/				
X			**************************************	
			<u> </u>	
<u> </u>				

<u> </u>				
	ł.	1		

Name of Candidate or Committee:

SD Assn of Healthcare Organizations Political Action Committee

For the reporting period ending:

December 31, 2004

Schedule A - Direct Contributions (continued)

Unitemized Contributions from Political Parties:		\$0.00	
Itemized Contributions from Political Parties: Party Name	Address	Amount	
None			
Total Contributions from Political Parties:		\$0.00	
Itemized Contributions from Political Action C PAC Name	ommittees (PAC's) - All contributions from PA Address	AC's must be itemized. Amount	
None	Address	Amount	
None			
	·		
	4		
		, , , , , , , , , , , , , , , , , , , ,	
Total Contributions from Political Action Committee	ees:	\$0.00	
Tatal of All Diseat Contributions		ው ስ ስለ	
Total of All Direct Contributions:		\$0.00	

SD Assn of Healthcare Organizations Political Action Committee

December 31, 2004

Schedule B - Fund-Raising Events Proceeds

List on this schedule fund-raising events held to raise money for the candidate and the net proceeds derived from each event. If a contributor gives more than \$100 or their contribution results in their aggregate being more than \$100 in the calendar year, those contributions must be itemized on Schedule A.

Type or Name of Event	Net Proceeds
None	

Total:	\$0.00

Schedule C - In Kind Contributions

Report all non-cash contributions of goods or services and the estimated fair market value. If the value exceeds \$100, the name of the contributor, residence address and place of employment must be reported.

Nature of Non-Cash Contribution	Name, Residence Address & Place of Employment	Estimated Value
Labor	David R Hewett, 5813 Tomar Rd, SFSD, SDAHO	\$100.00
Labor	Marnee L Aschoff, 2509 S Grinnell Av, SFSD, SDAHO	\$300.00
SDAHO Support of Postage	SDAHO, 3708 W Brooks PI, SFSD 57106	\$180.28
SDAHO Support of Travel	SDAHO, 3708 W Brooks PI, SFSD 57106	\$10.36
SDAHO Support of Printing	SDAHO, 3708 W Brooks PI, SFSD 57106	\$0.00
SDAHO Support of Legal & Accounting	SDAHO, 3708 W Brooks PI, SFSD 57106	\$0.00
SDAHO Support of Miscellaneous Expenses	SDAHO, 3708 W Brooks PI, SFSD 57106	\$0.00
	Total:	\$590.64

Schedule D - Other Income

Use this schedule to report any refunds, interest earned or other income which is not a direct contribution.

Source of Income	Amount
Interest Income on Accounts	\$31.52
Total:	\$31.52
Total.	401.02

SD Assn of Healthcare Organizations Political Action Committee

uu.

December 31, 2004

Schedule E - Expenditures

This schedule is to report all expenditures relating to a candidate's campaign. Line items have been provided for reporting common expenses. All other expenses should be listed. All contributions to candidates and committees must be listed individually.

Expenses		Contributions Made to Candidates and Committees		
Item	Amount	Name of Candidate or Committee	Amou <u>nt</u>	
Advertising	:	None		
Consulting				
Postage				
Printing				
Rent		-		
Salaries				
Telephone				
Travel				
Utilities				
	List other expense amounts below			
•	·			
A				
2007				
,				
······································				
	!			
	:			
	:			
<u></u>				
	1		:	
		Total Expendi	tures: \$0.00	

SD Assn of Healthcare Organizations Political Action Committee

December 31, 2004

Schedule F - Debts and Obligations

This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.

Owed to:	Owed for:	Amount
None		
	·	
	Total Obligations:	\$0.00

SD Assn of Healthcare Organizations Political Action Committee December 31, 2004

Summary Page

This summary sheet will give a brief outline of all campaign finance activity during this reporting period.

1.	Amount on hand, if any, at the beginning of the reporting p	eriod:	\$6,629.02
2.	Receipts		
	Schedule A - Direct Contributions	\$0.00	
	Schedule B - Fund-Raising Events	\$0.00	
	Schedule C - In Kind Contributions	\$590.64	
	Schedule D - Other Income	\$31.52	e e e e e e e e e e e e e e e e e e e
	Total of all Receipts	\$622.16	
3.	Total Monetary Receipts		\$31.52
4.	Candidate's Personal Contribution to Own Campaign		\$0.00
5.	Monetary Loans to Candidate or Committee During Reporting Period		\$0.00
6.	Monetary Loans Repaid During Reporting Period		\$0.00
7.	Expenditures - Schedule E		\$0.00
8.	Unpaid Obligations - Schedule F	\$0.00	
9.	Amount on hand at the close of this reporting period. *		\$6,660.54

^{*}The amount on hand at the close of the reporting period should equal the amount of money which the committee has on hand in all checking, savings and cash accounts on last day of the reporting period.